

# Pick Up Authorization Form

Child's Name \_\_\_\_\_ Date: \_\_\_\_\_

Please list three people and their phone numbers (not including the child's parents) who we are authorized to release your child to in case of emergency or if the child is not picked up in a timely manner. Every effort will be made to notify the parents before releasing the child. All authorized individuals are required to show photo identification at the time of release.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

List anyone NOT AUTHORIZED to pick up your child:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian Printed Name \_\_\_\_\_